PTOSSES (08-03)
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U.S. Patient and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Papermont Reduction Act of 1985, no personal are required to respond to a collection of information under PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application of Docked Mumber Application of Docked Mumber A 1 6 79 6 8 9		
	CLAIMS AS FILED PART I (Column 1) (Column 2)						SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	FOR MUMBER FILED			MUMBE	MUMBER EXTRA		RATE	FEE		RATE	FEE
	ASIC FEE F CFR 1.16(a))							. <u>385°°</u>	OR		<u></u>
	FR 1.18(d)		minus 20	• •			× 8•		OR	x s•	
	PENDENT CLAM FR 1.16(b))	13	minus 3				x s•	•	OR	x \$•	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(4))							+5=		OR	• • _ •	
" If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL	35°00	OR	TOTAL	
		AIMS AS AME									
	•				OR		THAN				
 		(Column 1)		(Column 2)	(Column 3)	1	SMALL	ERILLY	1		ENTITY
¥		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAD FOR	PRESENT EXTRA	3	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONA FEE
Ş	Total or cen union	• 1	Mines	" 20	• /		× 8 •		OR	x 8	
ENDMENT	Independent OF CFR LINES	• 7	Minus	" 7	• /		x 5 •	1	OR	x s	
Ĭ		ADDW OF MATTRU		DIT CLAMA CITCO	FR 1.1860)		+5 •	1	OR	+, .	
FIRST PRESENTATION OF MATERIA DEPENDENT GLAMM (\$7.0PR 1.1860)						, ,	TOTAL	/	OR.	TOTAL ADD'L FEE	
							ADD'L FEE	LZ	, •	POOLIFEE	
H		(Column 1)		(Column 2) HIGHEST	(Column 3)	1			1		
N N	-	REMAINING AFTER AMENDMENT		MUMBER PREVIOUSLY PAID FOR	PRESENT		RATE	TIONAL FEE		RATE	ADOI TIONA FEE
M	Total CF CFR LIBOR	.17	Minus	- W	•		x se		OR	x 5	<u> </u>
AMENDMENT	Independent gr GRI 1.1699	. 6	Minus	" 3	. 3	1	× 5	124	OR	x s	
₹	FIRST PRESENTATION OF MULTIPLE DEPONDENT CLASM (OF CFR 1.16(4))					1	+8•		OR	+8	
							TOTAL ADO'L FEE	1719 2	OR	TOTAL ADD'T FEE	
カ	-12010	60-1 11		(Column 2)	(Column 3)						
-	14 U4	(Column 1)	1	HIGHEST	PRESENT	1	RATE	ADD1-	1	RATE	ADDI
5	<i>'</i>	REMAINING AFTER		PREVIOUSLY	EXTRA		MAIE	TIONAL		1	TION
ÆM	Total	AMENDMENT	Minus	PAIDFOR	1.	1			l or	× 5	
ENDM	Brossesdark	1. 19	Mires		1-(1)	1	× 5	 	1 ```	x : •	
AME	On Charles	1 P		0	- 4	1	x3•	 	- 00	-	
\perp	FAST PRESEN	TATION OF MULTIP	e oepeko	ENTOLAN DTO	FR 1.1663	J	TOTAL		- OR	TOTAL	
1					de est in anti-	. 1	ADD'L FEE	<u> </u>	OR	ADD'T FEE	<u></u>
	CO MINISTRAL CONTRACTOR	column 1 is less (h I Mumber Previous Mumber Previous	y Paid For		g de mesas tinaan 20. E de does tinaan 2. :	e entr	- J.	is the appropri	iate best ba	column 1.	

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.18. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially in governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, understood the rest of the USPTO. Time will very depending upon the individual case. Any comments including galledge, preparing, and submitting the complete depication for reducing this burden, should be sent to the Chief information Officer, U.S. Patient on the amount of time you require to complete this form entitle suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patient and Tradement Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1439, Alexandria, VA 22313-1450.